

# ***"RAMSEY COUNTY VOTES WITH PRIDE"***

## **ABSENTEE BALLOT APPLICATION**

**PLEASE NOTE:** The law requires a reason for obtaining an absentee ballot.

(Check one)

☐

Absence from precinct

☐

Religious discipline or observance of religious holiday

☐

Illness or disability

☐

Service as election judge in another precinct

NAME \_\_\_\_\_ Birthdate \_\_\_\_\_ Phone No. \_\_\_\_\_  
(PLEASE PRINT) (optional) (optional)

**MY LEGAL RESIDENCE IN RAMSEY COUNTY IS:**

Street Address \_\_\_\_\_ Apt. or Box No. \_\_\_\_\_

City or Township \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**PLEASE MAIL MY ABSENTEE BALLOT TO ME AT THE FOLLOWING ADDRESS:**

Street Address \_\_\_\_\_ Apt. or Box No. \_\_\_\_\_

City or Township \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**X**

\_\_\_\_\_  
(LEGAL SIGNATURE) Today's Date \_\_\_\_\_

**Mail or FAX application to:** RAMSEY COUNTY OFFICE OF ELECTIONS AND VOTER SERVICES  
50 KELLOGG BOULEVARD WEST, SUITE 722 • ST PAUL MN 55102-1697  
TELEPHONE: (651) 266-2171 • FAX: (651) 266-2177

**FOR OFFICE USE ONLY:**

This certifies that a ballot was mailed or delivered in person as per application.

Registration # \_\_\_\_\_ Primary Ballot Issued: \_\_\_\_\_ General Ballot Issued: \_\_\_\_\_

Municipality \_\_\_\_\_ on \_\_\_\_\_ on \_\_\_\_\_

Ward \_\_\_\_\_ Precinct \_\_\_\_\_ by \_\_\_\_\_ by \_\_\_\_\_  
(Deputy/Election Judge) (Deputy/Election Judge)